PLEASE READ ALL INSTRUCTIONS.BEFORE COMPLETING THIS FORM.

7. Name and Address of Current Registered Agent Name Michelle Lee Street Address (P.O. Box Number is Not Acceptable) 3301 Northwest 47th Terrace Suite. Apt. #, Etc. #403 City Lauderdale Lakes State Lauderdale Lakes Date Lauderdale Lakes State Lauderdale Lakes State Lauderdale Lakes Lauderdale Lakes Date Lauderdale Lakes State Lauderdale Lakes Lauderdale Lakes State Lauderdale Lakes Lauderdale Lakes Date Lauderdale Lakes Date Lauderdale Lakes Date Lauderdale Lakes Date Lauderdale Lakes Lauderdale Lakes Lauderdale Lakes Date Lauderdale Lakes	CORPORATION REINSTATEMENT FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS								ΓE	FILED 09 DEC 28 PM 2: 43			
2. Percopal Office Address - No P.O. Box # Same as principal Suite. Apt. #, etc. Suite. Apt. #, etc. 4. Date incorporated or Qualified To Oo Business in Florida 9/2/2003 Suite. Apt. #, etc. 4. Date incorporated or Qualified To Oo Business in Florida 9/2/2003 S. F. Name and Address of Current Registered Agent Nama Applied For Schalasses of Current Registered Agent Nama Nam	1. Corporation Name										TALLAHASS	SEE, FLORIDA	
2. Principal Office Address - No P.O. Box # 2610 Summit Parkway 2. Same as principal Suite, Apt. 8, etc. 3. Mailing Office Address Same as principal Suite, Apt. 8, etc. 4. Date Incorporated or Qualified City A State City	SWAP AND SHARE COMMUNITY OUTREACH, INC.)Q163978;	3 <u>70</u>	
Suite, Apt. 8, etc. Suite, Apt. 9, etc. Suite, Apt. 8, etc. Suite, Apt. 8, etc. Suite, Ap	2. Principa	al Office Addre	ess - No l	P.O. Box #	3. Mailing O	ffice Addres	8						
City & State At lanta, Ga To De Baumers in Florida 9/2/2003 5. FEI Number 54-2124057 Applied For 54-2124057 Not Applicable for 54-2124057 7. Name and Address of Current Registered Agent Name Michelle Lee The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived. Salte Agric #403 City Addresses (P.O. Box Number is Not Acceptable) Salte Agric #403 City Equation of State Addresses which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived. Salte Agric #403 City Equation of Process were not received and requesting the reinstatement fee be waived. Signature of Registered Agent MUST SIGN 9. Names and Street Addresses of Each Officer and/or Director (Forda nonprofit corporations must list at least 3 directors) Titles Officers and/or Directors Signature of Registered Agent Parkway Atlanta, Ga. 30331 VPD Lee, Lorenzo 2610 Summit Parkway Atlanta, Ga. 30331 VPD Lee, Ra'Shelle 2610 Summit Parkway Atlanta, Ga. 30331 Signature of Registered Agent Parkway Atlanta, Ga. 30331 VPD Lee, Michelle 3301 N.W. 47th Terrace, #403 Lauderdale Lakes, FI 33319 Signature of Registered Agent Parkway Atlanta, Ga. 30331 Interity that I am an officer or director or the receiver or trustee ampowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this individual park and accurrent on chapter 607 or 617, F.S. I further certify that when filing this individual park and accurrent on chapter 607 or 617, F.S. I further certify that when filing this individual park and accurrent on chapter 607 or 617, F.S. I further certify that when filing this individual park and accurrent and ac	2610 S	Summit	Parkv	way	Same a	Same as principal			KEIN	21 Y FERIEW	06 07		
City & State Atlanta, Ga Zip Country 30331 VS 7. Name and Address of Current Registered Agent Name Michelle Lee Street Address (P.O. Box Number is Not Acceptable) 3031 Northwest 47th Terrace Suite Agri , Elic #403 City Lauderdale Lakes FL 32ip Code FL 32ip Code State 32ip Code Street Address (P.O. Box Number is Not Acceptable) Suite Agri , Elic #403 City Lauderdale Lakes FL 3319 State 32ip Code FL 32ip Code Redistreed Agreet with and accept the obligations of socion 607.6956 or 617.0950, F.S. Signature of Registered Agent Must Sign PD Lee, Lorenzo 2610 Summit Parkway Atlanta, Ga. 30331 SD Lee, Michelle 3301 N.W. 47th Terrace, #403 Lauderdale Lakes, FI 33319 SD Lee, Michelle 3301 N.W. 47th Terrace, #403 Lauderdale Lakes, FI 333319 Titles Wiggins, Ethel 2981 N. W. 7th Court Ft. Lauderdale, FI 303331 In Lentify that I am an officer or director or the receiver or trustee empowered to execute this application as provised for in chapter 607 or 617, F.S. I further certify that when filing this reinstantenent application, the reason for dissolution has been eliminated, the corporation is true and accurate, and my signature 607 or 617, F.S. I further certify that when filing this reinstantenent application, the reason for dissolution has been eliminated, the corporation are assisted to requirements of or 617, F.S. I further certify that when filing this reinstantenent application, the reason for dissolution has been eliminated, the corporation is true and accurate, and my signature 607 or 617, F.S. I further certify that when filing this reinstantenent application, the reason for dissolution has been eliminated, the corporation is true and accurate, and my signature 607 or 617, F.S. I that here is more dealer and accurate, and my signature 607 or 617, F.S. I that here is more dealers for the season for information of the formation of the	Suite, Apt. #, etc. Suite,					. #, etc.				4. Date Incorp	orated or Qualified		
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Michelle Lee Street Address (P. O. Bax Number is Not Acceptable) 3301 Northwest 47th Terrace State Agris & Etc. #403 8. I. being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607,0505 or 617,0503, F.S. Signature of Registered Agent Addresses of Each Officer and/or Director (Portda nonprofit corporations must list at least 3 directors) P. Names and Street Addresses of Each Officer and/or Director (Portda nonprofit corporations must list at least 3 directors) P. Names and Street Addresses of Each Officer and/or Director (Portda nonprofit corporations must list at least 3 directors) P. Name of Officer's and/or Director (Portda nonprofit corporations must list at least 3 directors) P. Name of Officer's and/or Director (Portda nonprofit corporations must list at least 3 directors) Name of Officer's and/or Director (Portda nonprofit corporations must list at least 3 directors) P. Lee, Lorenzo 2610 Summit Parkway Atlanta, Ga. 30331 VPD Lee, Ra'Shelle 2610 Summit Parkway Atlanta, Ga. 30331 VPD Lee, Michelle 3301 N.W. 47th Terrace, #403 Lauderdale Lakes, FI 33319 S. Wiggins, Ethel 2981 N. W. 7th Court Ft. Lauderdale, FI 30331 10. E-mail Address; dr.lorenzolee@swapandshare.org 11. Icertify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607,0401 or 617, 6401, F.S., Interfer certify that when filing this reinstatement application, the reason for dissolution have the same legal effect as it made under oath. 11. Icertify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution have the same legal effec													
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